

## ARCHITECTURAL CHANGE REQUEST FORM

Complete form and mail to: Architectural Committee P.O. Box 4408, Greensboro, NC 27404

PLANTATION	From (H	From (Home Owner):			Phone:	
T LANIATION	Propert	Property Address:			Email:	
	Prop	osed Improvements: (	Complete all sections	that apply		
EXTERIOR HOUSE PAINT/ROO	OFING:	·	<u> </u>			
Check each item to be changed and attac		eled for each:				
☐ Siding, ☐ Trim, ☐ Sh	utters, 🗆	Door, 🗖 Roofing	sample, $\square$ Other	r (describe)		
MAJOR LANDSCAPING PROJ	ECTS:		•			
Check each item attached to request:						
☐ Written plans/drawings	showing I	ocation on lot, $\square$	Materials used, 🛭	Other (descri	be)	
DECKS:				·	•	
Dimensions:		Type of wood used in constr	ruction:	Constructed by:		
Check each item attached to request:				1	_	
☐ Color chip(s), ☐ Draw	ng illustra	ating location in rela	tion to house, lot 8	& easements,	Other (describe)	
SHEDS: (Wooden Sheds Only)						
Dimensions (H x L x W):		Type of wood used in construction:		Constructed by:		
Check each item attached to request:						
☐ Color chip(s), ☐ Draw	ng illustra	ating location in rela	tion to house, lot 8	& easements,	□ Other (describe)	
FENCES:						
Dimensions (H x L):	vpe of wood us	sed in construction:	Type (split rail, picket, priva	acv. etc.):	onstructed by:	
Check each item attached to request:				<b>'</b>	_	
☐ Color chip(s), ☐ Draw	ng illustra	ating location in rela	tion to house, lot 8	& easements,	Other (describe)	
HOME ADDITIONS:						
Check each item attached to request:						
☐ Full blueprints or plans	showing 6	elevations, dimension	ons, relationship to	existing house	e and property,	
☐ Color chip(s), ☐ Roofir	g sample	(s), $\Box$ Other (desc	cribe)			
ALL OTHERS:	<u> </u>	<u> </u>	<u> </u>			
Describe requested Change:						
I/We, the owner(s) requesting						
costs of any maintenance, rep understand and agree that the						
Owner/Signature:		signature:	Application submitted		Proposed completion of alteration:	
				,,.		
		Ар	provals			
Date and decision of Architectural Control	Committee:	_	_	_		
Date review completed: [ ], Approved, Disapproved, Other (See comments below)						
Committee member signature:	Committee member signature		ture:	Committee mer	mber signature:	
Comments/Conditions:		1		1		
Notice: the homeowner is responsible municipal permit requirements, but ma					approval does not supercede mittee fails to act on this request within	
	utomatically ap	oproved, provided that it does	not contain erroneous data o	r fail to present full and	d adequate information upon which the	